PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (57)-127-32885

			or rax (S	1)-275-2005			
INSTRUCTIONS: This appropriate. All further c indicated unless corrected maintenance fee notificati	form should be used to orrespondence including to below or directed off ons.	for transmitting the ISS ng the Patent, advance of nerwise in Block 1, by (UE FEE and PUBLICAT orders and notification of a) specifying a new corre	TON FEE (if requi maintenance fees w spondence address;	red). Block vill be mail and/or (b)	ks 1 through 5 : led to the current indicating a sep	should be completed who t correspondence address arate "FEE ADDRESS"
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 466 7590 02/16/2011				Note: A certificate of mailing can only be used for domestic mailings of t Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mahave its own certificate of mailing or transmission.			
YOUNG & THOMPSON 209 Madison Street Suite 500 Alexandria, VA 22314				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unit States Postal Service with sufficient postage for first class mail in an eavelo addressed to the Mail Stop ISSUE FPEF address above, or being fassim transmitted to the USPTO (5/1) 273-2858, on the date indicated below.			
,							(Depositor's nam
							(Signatus
			L				(De
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	ATTORNEY DOCKET NO. CONFIRMATION NO.			
10/089,460	Giessen 2005-1001 9285						
TITLE OF INVENTION:	INTRALUMINAL DE	VICE, COATING FOR	SUCH DEVICE, AND ME	THOD FOR PREP.	ARING SA	ID DEVICE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	DTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	05/16/2011
EXAME	NER	ART UNIT	CLASS-SUBCLASS	1			
AZPURU, CARLOS A		1617	424-423000				
Change of corresponder CFR 1.363).	2. For printing on the p						
CFR 1.303). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ation (or "Fee Address"	* Indication form	(2) the name of a single firm (naving as a member a registered attorney or agent) and the names of up to			2 Young	& Thompson
3. ASSIGNEE NAME AN	D RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIG		ified below, no assignee eletion of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY				ocument has been filed f
OrbusNeich	Medical,	Wilmington, Delaware					
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government							
4a. The following (set() are submitted: 4b. Payment of Fee(): (Please first reapply any previously paid issue fee shown above) A check is enclosed. 4b. Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # c			The Director is hereby overpayment, to Depo	authorized to charge sit Account Numbe	e the requi	red fee(s), any de 20_ (enclose a	ficiency, or credit any n extra copy of this form).
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee and interest as shown by the re-	Publication Fee (if requ	tired) will not be accepte					
Authorized Signature _	Benoît	Castel	7	Date Ap:			
Typed or printed name				Registration No			
This collection of informat an application. Confidentia submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir	ion is required by 37 C dity is governed by 35 application form to the is for reducing this bur ginia 22313-1450. DO	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to th NOT SEND FEES OR C	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by th imated to take 12 m idual case. Any cor r, U.S. Patent and 7 THIS ADDRESS.	e public whinutes to conments on Trademark (SEND TO	hich is to file (and omplete, including the amount of the Office, U.S. Depo Commissioner	I by the USPTO to proces g gathering, preparing, ar ne you require to comple artment of Commerce, P.C for Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.